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Human Services Committee Public Hearing – March 3, 2016 House Bill 5440 AAC Medicaid Reimbursement For Diabetes Prevention And Self-Management Jim Williams, Government Relations Director American Heart Association

I would like to thank Chairwoman Moore and Chairwoman Abercrombie, and the Committee for providing me with the opportunity to comment in support of House Bill 5440, AAC Medicaid Coverage For Diabetes Prevention And Self-Management, on behalf of the American Heart Association.

The American Heart/Stroke Association (AHA) is the largest voluntary health organization in the world who is working to build healthier lives, free of cardiovascular disease and stroke. The AHA supports this legislation because we believe it will help in building healthier lives in Connecticut.

HB 5440 seeks federal approval for a Medicaid waiver for a five-year community-based education program to help type 2 diabetes, as well as federal approval for a Medicaid state plan amendment to provide Medicaid reimbursement for diabetes self-management training. We believe these steps to be common sense and supports the fact that prevention and education is less expensive than treatment.

According to a Connecticut Department of Public Health (DPH) 2011 Connecticut Diabetes fact sheet 6.9%, or about 186,000 Connecticut adults, 18 years and older, reported having been diagnosed with diabetes. An estimated 60,000 to 93,000 adults in Connecticut have undiagnosed diabetes. Connecticut adults with diabetes are 1.4 times as likely to be overweight, 1.8 times as likely to have high cholesterol levels, and 2.7 times as likely to have high blood pressure as residents without diabetes. Almost 1.6 million Connecticut adults are at increased risk of developing diabetes because they are overweight, have a sedentary lifestyle, or have a history of gestational diabetes, all of which are known risk factors. On average, 7 people are hospitalized every hour in Connecticut for diabetes related conditions. Their average stay in the hospital is 3 days.

This same Connecticut DPH fact sheet points out that the financial costs of diabetes in terms of direct cost (medical care) and indirect costs (lost productivity and premature mortality) of diabetes in Connecticut which are estimated at \$2.43 billion in 2006. In 2008, approximately \$128 million was billed for hospitalizations in Connecticut due directly to diabetes. Costs for hospitalizations due to diabetes-related causes totaled about \$1.8 billion in 2008.

Diabetes education and support helps people with diabetes learn how to manage their disease and be as healthy as possible by focusing on seven self-care behaviors: healthy eating, being active, blood sugar monitoring, taking medication, problem solving, healthy coping and reducing risks. This education and support not only is invaluable to those living with diabetes but also has been shown to reduce health care costs.

A diabetes self-management and support training program conducted specifically for Medicaid recipients with diabetes demonstrated a reduction in health care use within 1 year and over longer periods of time is likely to reduce costs associated with use of health care. Estudies have also shown that patients who had diabetes education and support help indicate a 34% decrease in hospital readmission and a 5.7% per year reduction in cost with a 12% decrease after 3 years. Other research has shown hospitalization rates for patients who had at least one educational visit were 34% lower than those who had no education.

H B 5440 would make diabetes prevention and self-management education services available to the Medicaid residents in CT, helping to build healthier lives while at the same time ultimately saving money in terms of direct and indirect health care costs. The AHA feels that this bill is worthy of your support.

Sincerely,

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ⁱ Connecticut Department of Public Health Diabetes Fact Sheet-2011. Accessed at http://www.ct.gov/dph/lib/dph/hisr/pdf/diabetesfactsheet_2011.pdf on February 19, 2016.

ii Balumarugan, et al. The Diabetes Educator. 32(6):893-900 Nov-Dec 2006.

iii Duncan, et al. The Diabetes Educator, Vol. 35, #5, October 2009.

iv Robbins, et al. Diabetes Care 2008 April 31 (4) 655-60.